

Medical Services, Central Office, will serve as the coordinator of the pilot project. The HRS District Office will serve in a supervisory capacity over the administration and operation of the pilot project in the District. Therefore, this agreement, including the District agreement as an addendum, provides for the Central Office and the District staff to function independently, but not exclusively of the other.

Therefore, the Central Offices of Children's Medical Services (PDCM), Health (PDHE), Social and Economic Services (PDSE), and Medical Services (PDSEM), in order to eliminate the extensive and expensive overlap in the functions and goals of existing state and federal programs, and in the interest of pooling resources to better serve the citizens of Florida, agree on a pilot project basis, to the following terms:

- I. The Children's Medical Services Program Office will:
 - A. Provide guidance to the District CMS Office for the implementation and continual operation of the pilot project.
 - B. Evaluate the pilot project on a quarterly basis and submit a copy of the evaluation to the Health Program Office (PDHE), Social and Economic Services Program Office (PDSE), Medical Services and the HRS District Office. The evaluation procedure to be developed jointly by the

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Program Offices. The report will be developed by CMS.

- C. On a continuous basis, monitor the medical and other health-related aspects of the project.
- D. Assure that the rules, regulations and policies which govern the Florida Medicaid Program are followed for the provision of screening, diagnosis and treatment services.

II. The Health Program Office will:

- A. Monitor to assure that, when notified by CMS of any additions/deletions to the CMS/Medicaid caseload, each respective county health unit will update their monthly eligibility list.
- B. Assure that the CMS District Office is provided training on the monthly EPSDT reports.
- C. Assure that Medical Services and the HRS District Office receive a copy of the monthly reports (by age group and by county) no later than fifteen (15) days upon their receipt.

III. The Social and Economic Services Program Office will:

- A. Assure that parents or guardians of eligible individuals and/or eligible individuals are informed of the availability of initial and periodic screening services, that arrangements are made for eligible individuals to receive these services,

and that parents, guardians and/or eligible individuals are counseled on the benefits of screening and follow-up diagnostic and treatment services.

- B. Assure that parents, guardians or eligible individuals are informed of the availability of collateral social services such as transportation and that such services are provided or arranged for when requested.

IV. Medical Services, Central Office, will:

- A. Take necessary steps to assure that eligibles have in their possession a valid Medicaid I.D. card.
- B. Make arrangements with Systems Development Corporation, Integrated Services, Inc., (SDC) to identify CMS/Medicaid eligible individuals by county on the EPSDT Monthly Eligibility List (PC060) and to provide the District CMS Office with a copy of the PC060 on a monthly basis.
- C. Assure that payments for periodic screening services will be made to the CMS District Office and the DHRS Laboratory providing the laboratory services at a rate provided for in the Legislative Appropriations Act.
- D. Assure that program regulations and instructions, including billing procedures, are issued to the CMS District Office.
- E. Serve as the liaison between CMS and SDC regarding computer involvement in the operation of the project.
- F. Assure that SDC will provide training to the CMS District staff on screening billing procedures.

- G. Assure that the Health Program Office will provide training to CMS District staff on monthly reports.
 - H. Oversee the coordination between PDCM, PDSE and PDHE in providing screening services and ancillary services.
 - I. Through reports received from the HRS District Office, and the quarterly evaluations conducted by the CMS Program Office, monitor the implementation and continuous operation of the pilot project.
 - J. Notify the HRS District Office, copying the CMS Program Office, SES Program Office, and the Health Program Office, of any problem areas within the pilot project.
 - K. Conduct a meeting on a monthly basis with state Health, CMS, SES and Medical Services staff regarding the progress of the pilot project.
 - L. Make arrangements for the overall evaluation of the effectiveness and efficiency of the pilot project.
- V. The Office of Evaluation will be responsible for evaluating this pilot project.

This agreement and the District agreement, which is an addendum to this agreement, by and between Children's Medical Services, Health, Social and Economic Services, and Medical Services, is effective when signed and shall continue in full force and effect until otherwise revised in writing and signed by all three parties

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or cancelled by any of the above parties upon written notice of
at least thirty (30) days prior to proposed termination date.
This agreement is to be reviewed at least annually by all parties
involved.

Nicholas G. Alexiou

Program Staff Director (PDCM)

10/26/78

Date

Charles Hall

Program Staff Director (PDSE)

10/21/78

Date

E. Charles Sather

Program Staff Director (PDHE)

OCT 26 1978.

Date

Walter B. Conwell

Program Administrator (PDSEM)

OCTOBER 26, 1978

Date

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EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT OF CHILDREN

Report for month of _____ 19____

Total children screened _____

Total children referred _____

Health Department referrals _____

Private Physician referrals _____

Private dentist referrals _____

Other referrals _____

CONDITIONS FOUND

NUMBER

REFERRED TO

Peri-Dental Abscess		
Caries, Other Oral Pathology		
Obesity, Other Nutrition Problem		
Club Foot		
Scoliosis		
Other Orthopedic/Musculo-Skeletal Abnormalities		
Mental Retardation		
Seizures		
Other Neurological Conditions		
Ringworm, Pediculosis, Other Scalp/Hair Pathology		
Impetigo		
Other Skin Pathology		
Poor Vision		
Eye Defects or Pathology		
Poor Hearing		
Otitis Media		
Speech Defect		
Nasal Deformity		
Acute Tonsillitis		
Enlarged Lymph Glands		
Hypo/Hyperthyroidism		
Abnormal Heart Condition (History, signs, symptoms)		
Rheumatic Fever (History, signs, symptoms)		
Hypertension		
Asthma		
Abdominal Mass, Pregnancy Suspect or Confirmed		
Other Abdominal Mass, Suspect		
Hernia		
Hydrocele		
Hypospadias		
Phimosis, severe		
Urinary Tract Infection		
Urinalysis Positive for Albumin		
Positive for Glucose		
Anemia, Sickle Cell Suspect		
Other Anemia		
Intestinal Parasites		
Tuberculin Skin Test Positive		
Immunization Incomplete		
Indication of Child Abuse or Neglect		
Genereal Disease		
Lead Poisoning		
(specify)		
(specify)		

Monthly Medicaid Screening Report

HRS/HFO/FH

72/05 (R-2)

Mail to: Medicaid Screening Program
 Child Health, Health Program Office
 Department of HRS
 1323 Winewood Boulevard

EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT OF CHILDREN

(Name of Screening Agency)

Address)

Report for month of _____ 19__

Total children screened _____

Total children referred _____

Health Department referrals _____

Private Physician referrals _____

Private dentist referrals _____

Other referrals _____

CONDITIONS FOUND

NUMBER

REFERRED TO

Peri-Dental Abscess		
Caries, Other Oral Pathology		
Obesity, Other Nutrition Problem		
Club Foot		
Scoliosis		
Other Orthopedic/Musculo-Skeletal Abnormalities		
Mental Retardation		
Seizures		
Other Neurological Conditions		
Ringworm, Pediculosis, Other Scalp/Hair Pathology		
Impetigo		
Other Skin Pathology		
Poor Vision		
Eye Defects or Pathology		
Poor Hearing		
Otitis Media		
Speech Defect		
Nasal Deformity		
Chronic Tonsillitis		
Enlarged Lymph Glands		
Hyperthyroidism		
Abnormal Heart Condition (History, signs, symptoms)		
Rheumatic Fever (History, signs, symptoms)		
Hypertension		
Asthma		
Abdominal Mass, Pregnancy Suspect or Confirmed		
Other Abdominal Mass, Suspect		
Hernia		
Hydrocele		
Hypospadias		
Phimosis, severe		
Urinary Tract Infection		
Urine Analysis Positive for Albumin		
Positive for Glucose		
Anemia, Sickle Cell Suspect		
Other Anemia		
Intestinal Parasites		
Tuberculin Skin Test Positive		
Immunization Incomplete		
Indication of Child Abuse or Neglect		
Genereal Disease		
Lead Poisoning		
Other (specify)		
specify		

Monthly Medicaid Screening Report

RS/HPO/FH

72/05 (R-2)

Mail to: Medicaid Screening Program
 Child Health, Health Program Office
 Department of HRS
 1323 Winewood Boulevard
 Tallahassee, Florida 32301

EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT OF CHILDREN

(Name of Screening Agency)

Address)

Report for month of 19

Total children screened

Total children referred

Health Department referrals

Private Physician referrals

Private dentist referrals

Other referrals

CONDITIONS FOUND

NUMBER

REFERRED TO

Peri-Dental Abscess

Caries, Other Oral Pathology

Obesity, Other Nutrition Problem

Club Foot

Scoliosis

Other Orthopedic/Musculo-Skeletal Abnormalities

Mental Retardation

Seizures

Other Neurological Conditions

Ringworm, Pediculosis, Other Scalp/Hair Pathology

Impetigo

Other Skin Pathology

Poor Vision

Eye Defects or Pathology

Poor Hearing

Otitis Media

Speech Defect

Nasal Deformity

Chronic Tonsillitis

Enlarged Lymph Glands

Hypothyroidism, Hyperthyroidism

Abnormal Heart Condition (History, signs, symptoms)

Rheumatic Fever (History, signs, symptoms)

Hypertension

Asthma

Abdominal Mass, Pregnancy Suspect or Confirmed

Other Abdominal Mass, Suspect

Hernia

Hydrocele

Hypospadias

Phimosis, severe

Urinary Tract Infection

Urinalysis Positive for Albumin

Positive for Glucose

Anemia, Sickle Cell Suspect

Other Anemia

Intestinal Parasites

Tuberculin Skin Test Positive

Immunization Incomplete

Indication of Child Abuse or Neglect

Venereal Disease

Lead Poisoning

Other (specify)

specify

Monthly Medicaid Screening Report

Mail to: Medicaid Screening Program
 Child Health, Health Program Office
 Department of HRS
 1323 Winewood Boulevard

HRS/HPO/FH

72/05 (R-2)

AGREEMENT
BETWEEN
HEALTH,
CHILDREN'S MEDICAL SERVICES
AND
SOCIAL AND ECONOMIC SERVICES - MEDICAL SERVICES
INCORPORATING
CHILDREN'S MEDICAL SERVICES
As a provider of Screening Services
Under the
EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT PROGRAM
ON A
PILOT PROJECT BASIS
in
SUB-DISTRICT II-B

Effective November 1, 1978, the pilot project establishing Children's Medical Services (CMS) as a provider of screening services under the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program will be extended to eight (8) counties: Leon, Jefferson, Madison, Taylor, Wakulla, Franklin, Liberty and Gadsden in Sub-District II-B. CMS participation as a provider of screening services on a pilot project basis is considered appropriate for reasons which include the following:

1. To ensure that CMS/Medicaid eligible individuals are screened and that appropriate services are provided, and

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2. To prevent duplication of services provided during screening, (it is estimated that 30% of CMS clients are Medicaid eligible).

The District Pilot Project Committee will serve as the coordinator of the pilot project in Sub-District II-B. The HRS District II office will serve in a supervisory capacity over the administration and operation of the pilot project in Sub-District II-B. Therefore, this agreement, will serve as an addendum to the HRS Central office agreement.

The HRS District Offices of Children's Medical Services (CMS), Health (H), and Social and Economic Services - Medical Services (SES) in order to eliminate the extensive and expensive overlap in the functions and goals of existing state and federal programs, and in the interest of pooling resources to better serve the citizens of Sub-District II-B, agree on a pilot project basis, to the following terms:

- I. The HRS District II Children's Medical Services Program Office will:
 - A. Provide initial and periodic screening services only for CMS/Medicaid eligible individuals, twenty (20) years of age and under, who reside in the pilot project counties.
 - B. Determine current eligibility for Medicaid by viewing the Medicaid I.D. card and/or by calling System Development Corporation (SDC) at their toll-free number (1-800-342-3106).
 - C. Insure that screening services are provided within the rules, regulations and policies which govern the EPSDT Program

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